Company Tracking Number: 690 RI 2011

TOI: H13I Individual Health - Short Term Care Sub-TOI: H13I.002 Nursing Home

Product Name: Recovery Care

Project Name/Number: 690 RI 2011/690 RI 2011

Filing at a Glance

Company: Equitable Life & Casualty Insurance Company

Product Name: Recovery Care SERFF Tr Num: ELCC-127766192 State: Arkansas

TOI: H13I Individual Health - Short Term Care SERFF Status: Closed-State Tr Num: 50116

Disapproved

Sub-TOI: H13I.002 Nursing Home Co Tr Num: 690 RI 2011 State Status: Disapproved-Closed

Filing Type: Rate Reviewer(s): Rosalind Minor

Authors: Mark Banks, Kathy Foster, Disposition Date: 11/07/2011

John Neville

Date Submitted: 10/27/2011 Disposition Status: Disapproved

Implementation Date Requested: 11/28/2011 Implementation Date:

State Filing Description:

General Information

Project Name: 690 RI 2011 Status of Filing in Domicile: Not Filed

Project Number: 690 RI 2011 Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Individual

Submission Type: New Submission

Market Type: Individual Individual Market Type:

Overall Rate Impact: 15% Filing Status Changed: 11/07/2011
State Status Changed: 11/07/2011

Deemer Date: Created By: Kathy Foster

Submitted By: Kathy Foster Corresponding Filing Tracking Number:

Filing Description:

Re: Equitable Life & Casualty Rate Increase

Policy Form 690

Attached is an actuarial memorandum outlining our request for a rate increase on our RecoveryCare 690 Short-Stay Nursing Home Form. In August 2010, we filed for a 60% rate increase and were granted a lower rate increase. This purpose of this filing is to seek a rate increase for the remainder of 60%.

Policyowner notification of the rate increase will begin as soon as possible subject to state insurance department approval. Policyowners will be notified of the increase at least 30 days before it takes effect.

Company Tracking Number: 690 RI 2011

TOI: H13I Individual Health - Short Term Care Sub-TOI: H13I.002 Nursing Home

Product Name: Recovery Care

Project Name/Number: 690 RI 2011/690 RI 2011

Thank you for your consideration in this matter. If you should have any questions, please call me at (801) 579-3414.

Very truly yours,

EQUITABLE LIFE & CASUALTY INSURANCE COMPANY

Richard E. Klar, Jr., ASA, MAAA Corporate Actuary

Company and Contact

Filing Contact Information

Kathy Foster, Regulatory Compliance Analyst Kathy.Foster@Equilife.com
Equitable Life & Casualty Insurance Company 801-579-3468 [Phone]
3 Triad Center 801-579-3471 [FAX]

Suite 200

Salt Lake City, UT 84180

Filing Company Information

Equitable Life & Casualty Insurance Company CoCode: 62952 State of Domicile: Utah

3 Triad Center Group Code: Company Type: Life and Health

Suite 200 Group Name: State ID Number:

Salt Lake City, UT 84180 FEIN Number: 87-0129771

(801) 579-3400 ext. [Phone]

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No

Fee Explanation: 1 rate filing = \$50.00

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Equitable Life & Casualty Insurance Company \$50.00 10/27/2011 53260712

Company Tracking Number: 690 RI 2011

TOI: H13I Individual Health - Short Term Care Sub-TOI: H13I.002 Nursing Home

Product Name: Recovery Care

Project Name/Number: 690 RI 2011/690 RI 2011

Correspondence Summary

Dispositions

Status Created By Created On Date Submitted

Disapproved Rosalind Minor 11/07/2011 11/07/2011

Objection Letters and Response Letters

Objection Letters Response Letters

Status Created By Created On Date Submitted Responded By Created On Date Submitted

Pending Rosalind Minor 10/28/2011 10/28/2011 Kathy Foster 10/31/2011 10/31/2011

Industry Response

Company Tracking Number: 690 RI 2011

TOI: H131 Individual Health - Short Term Care Sub-TOI: H131.002 Nursing Home

Product Name: Recovery Care

Project Name/Number: 690 RI 2011/690 RI 2011

Disposition

Disposition Date: 11/07/2011

Implementation Date: Status: Disapproved

Comment:

Given the current state of the ecomomy and the fact that the block of business is maintaining a low loss ratio, we are disapproving your request for a rate increase.

Thank you for your understanding and cooperation.

Company Name:	Overall %	Overall % Rate	Written	# of Policy	Written	Maximum %	Minimum %
	Indicated	Impact:	Premium	Holders	Premium for	Change (where	Change (where
	Change:		Change for	Affected for this	this Program:	required):	required):
			this	Program:			
			Program:				
Equitable Life & Casua Insurance Company	lty 15.000%	15.000%	\$3,606	29	\$24,040	15.000%	15.000%

 SERFF Tracking Number:
 ELCC-127766192
 State:
 Arkansas

 Filing Company:
 Equitable Life & Casualty Insurance Company
 State Tracking Number:
 50116

Company Tracking Number: 690 RI 2011

TOI: H13I Individual Health - Short Term Care Sub-TOI: H13I.002 Nursing Home

Product Name: Recovery Care

Project Name/Number: 690 RI 2011/690 RI 2011

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Disapproved	No
Supporting Document	690 Exhibit I - Policy Counts - 2011	Disapproved	No
Supporting Document	Exhibit II - Experience	Disapproved	No
Supporting Document	Exhibit IV- Complete Rate History	Disapproved	No
Rate	Premium Rates	Disapproved	No

Company Tracking Number: 690 RI 2011

TOI: H13I Individual Health - Short Term Care Sub-TOI: H13I.002 Nursing Home

Product Name: Recovery Care

Project Name/Number: 690 RI 2011/690 RI 2011

Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 10/28/2011 Submitted Date 10/28/2011

Respond By Date
Dear Kathy Foster,

This will acknowledge receipt of the captioned filing.

Objection 1

- Health - Actuarial Justification (Supporting Document)

Comment:

What is the history of the rate increases in Arkansas. Please give percentage of increase approved and date of approval.

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

Company Tracking Number: 690 RI 2011

TOI: H13I Individual Health - Short Term Care Sub-TOI: H13I.002 Nursing Home

Product Name: Recovery Care

Project Name/Number: 690 RI 2011/690 RI 2011

Response Letter

Response Letter Status Submitted to State

Response Letter Date 10/31/2011 Submitted Date 10/31/2011

Dear Rosalind Minor,

Comments:

Thank you for your review of Equitable Life & Casualty Insurance Company's recent request for a rate increase on our Short Stay Nursing Home Policy (Form 690). We appreciate your timely response. We have received your objection letter dated October 28, 2011 and will respond to your concerns below.

Response 1

Comments: A complete rate history of Arkansas for Form 690 has been included with this filing (Please see Exhibit IV). **Related Objection 1**

Applies To:

- Health - Actuarial Justification (Supporting Document)

Comment:

What is the history of the rate increases in Arkansas. Please give percentage of increase approved and date of approval.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: Exhibit IV- Complete Rate History

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Thank you for your consideration in this matter. With this revision, we hope that this filing now meets with your approval. If you should have any questions, please call me at (801) 579-3414. We look forward to hearing from you soon.

Very truly yours,

Company Tracking Number: 690 RI 2011

TOI: H13I Individual Health - Short Term Care Sub-TOI: H13I.002 Nursing Home

Product Name: Recovery Care

Project Name/Number: 690 RI 2011/690 RI 2011

EQUITABLE LIFE & CASUALTY INSURANCE COMPANY

Richard E. Klar, Jr., ASA, MAAA Corporate Actuary

Sincerely,

John Neville, Kathy Foster, Mark Banks

 SERFF Tracking Number:
 ELCC-127766192
 State:
 Arkansas

 Filing Company:
 Equitable Life & Casualty Insurance Company
 State Tracking Number:
 50116

Company Tracking Number: 690 RI 2011

TOI: H131 Individual Health - Short Term Care Sub-TOI: H131.002 Nursing Home

Product Name: Recovery Care

Project Name/Number: 690 RI 2011/690 RI 2011

Rate Information

Rate data applies to filing.

Filing Method: Electronic

Rate Change Type: Increase

Overall Percentage of Last Rate Revision: 15.000%

Effective Date of Last Rate Revision: 03/28/2010

Filing Method of Last Filing: Electronic

Company Rate Information

Company Name:	Overall %	Overall % Rate	Written	# of Policy	Written	Maximum %	Minimum %
	Indicated	Impact:	Premium	Holders	Premium for	Change (where	Change (where
	Change:		Change for	Affected for this	this Program:	required):	required):
			this Program:	Program:			
			uns i rogiani.	i rogram.			
			tilis i rogram.	r rogram.			

Company Tracking Number: 690 RI 2011

TOI: H131 Individual Health - Short Term Care Sub-TOI: H131.002 Nursing Home

Product Name: Recovery Care

Project Name/Number: 690 RI 2011/690 RI 2011

Rate/Rule Schedule

Affected Form **Rate Action Information: Attachments Schedule Document Name:** Rate Item **Numbers:** Action:* Status: (Separated with commas) Previous State Filing 690 Rates AR Disapprove Premium Rates 690 Revised 44622 (15% Number: d Percent Rate Change increase).pdf 15.000 11/07/2011

Request:

Company Tracking Number: 690 RI 2011

TOI: H131 Individual Health - Short Term Care Sub-TOI: H131.002 Nursing Home

Product Name: Recovery Care

Project Name/Number: 690 RI 2011/690 RI 2011

Supporting Document Schedules

Item Status: Status

Date:

Satisfied - Item: Health - Actuarial Justification Disapproved 11/07/2011

Comments: Attachment:

690 2012 Rate Revision ACTUARIAL MEMORANDUM AR.pdf

Item Status: Status

Date:

Satisfied - Item: 690 Exhibit I - Policy Counts - 2011 Disapproved 11/07/2011

Comments: Attachment:

polcnt06302011.pdf

Item Status: Status

Date:

Satisfied - Item: Exhibit II - Experience Disapproved 11/07/2011

Comments: Attachment:

680690 2012 Rate Increase AR - Exh II.pdf

Item Status: Status

Date:

Satisfied - Item: Exhibit IV- Complete Rate History Disapproved 11/07/2011

Comments: Attachment:

ExhIV - RateHistory.pdf

Exhibit IV - Arkansas Rate History Form 690

Year	Year Approved		Effective Date	
1995	Form Approved	9/21/1995		
2010	15%	2/16/2010	3/28/2010	
2011 Proposed	15%	Pending		